

Date of letter

Dear Parent of _____,

Your student's annual IEP meeting, including consideration of post-secondary goals and transition services needed, will be held soon. To the extent appropriate, we must invite a representative of the agency or agencies indicated which may be responsible for providing or paying for some transition services. We would like to do so, and we need your written consent to invite them to the meeting.

- ☐ Vocational Rehabilitation
- ☐ Division of Services for People with Disabilities
- ☐ Department of Workforce Services
- ☐ _____ Disability Resource Center
(college)
- ☐ Other agency _____

Please sign below indicating your consent or refusal for that agency to be invited to the IEP meeting. We will contact you soon with the date and time of the meeting.

Sincerely,

Case Manager
Phone number

☐ I **DO** give my consent to have the above-listed agency or agencies invited to the upcoming IEP meeting.

☐ I **DO NOT** give my consent to have the above-listed agency or agencies invited to the upcoming IEP meeting.

Signature of parent or student if over 18 years old.

Date